

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT** ▼Example: If typing, type  
over the lines

Jazz PAC

ADDRESS (number and street)

607 14th Street, NW, Suite 800

☐Check if different  
than previously  
reported. (ACC)

Washington

DC

20005

2. **FEC IDENTIFICATION NUMBER** ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00405290

3. IS THIS  
REPORT☒NEW  
(N)**OR**☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☒January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE**-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

07

01

2007

through

12

31

2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Elizabeth Foote

Signature of Treasurer

Electronically Filed by Elizabeth Foote

Date

01

31

2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
Jazz PAC

Report Covering the Period:

From:

M	M		D	D		Y	Y	Y	Y
0	7		0	1		2	0	0	7

To:

M	M		D	D		Y	Y	Y	Y
1	2		3	1		2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2007</span>		10368.19
(b) Cash on Hand at Beginning of Reporting Period .....	65269.40	
(c) Total Receipts (from Line 19) .....	47548.52	145109.60
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	112817.92	155477.79
7. Total Disbursements (from Line 31) .....	96520.20	139180.07
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	16297.72	16297.72
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	2730.73	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Jazz PAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	7	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
1	2	3	1	2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	10400.00	20400.00
(i) Itemized (use Schedule A) .....	0.00	0.00
(ii) Unitemized .....	10400.00	20400.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ➤	0.00	0.00
(b) Political Party Committees .....	37000.00	99000.00
(c) Other Political Committees (such as PACs) .....	47400.00	119400.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ..... ➤		
12. Transfers From Affiliated/Other Party Committees .....	148.52	25709.60
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	47548.52	145109.60
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	47548.52	145109.60

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	12020.20	16180.07
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	12020.20	16180.07
22. Transfers to Affiliated/Other Party Committees.....	500.00	500.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	46000.00	84500.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	38000.00	38000.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	96520.20	139180.07
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	96520.20	139180.07

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	47400.00	119400.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	47400.00	119400.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	12020.20	16180.07
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	12020.20	16180.07

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 31

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Jazz PAC

**A.**

Full Name (Last, First, Middle Initial)

Martha W. Murphy

Mailing Address 200 N. Jefferson, Suite 400

City

El Dorado

State

AR

Zip Code

71730

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Coastal Land & Drilling  
Co., LLC

Occupation  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

Transaction ID: C312

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Mary P. Wheeler

Mailing Address 19705 Stough Farm Road

City

Cornelius

State

NC

Zip Code

28031

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Wheeler Television

Occupation  
Television Producer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 9 / 2 0 0 7

Transaction ID: C321

Amount of Each Receipt this Period

2500.00

**C.**

Full Name (Last, First, Middle Initial)

Andre Duggin

Mailing Address 985 Old Eagle School Road  
Suite 504

City

Wayne

State

PA

Zip Code

19087

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AV International

Occupation  
Insurance Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 9 / 2 0 0 7

Transaction ID: C211

Amount of Each Receipt this Period

2500.00

**SUBTOTAL** of Receipts This Page (optional) .....

6000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 31

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Jazz PAC

A.

Full Name (Last, First, Middle Initial)

William R. Hearst, III

Mailing Address 765 Market Street, 34D

City

San Francisco

State

CA

Zip Code

94103-3300

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The San Simeon GroupOccupation  
Investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 0 7 / 2 0 0 7

Transaction ID: C307

Amount of Each Receipt this Period

2400.00

B.

Full Name (Last, First, Middle Initial)

Frederick H. Graefe

Mailing Address 555 11th Street, NW  
Suite 675

City

Washington

State

DC

Zip Code

20004

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Law Office of Frederick  
H. GraefeOccupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 2 / 2 0 0 7

Transaction ID: C302

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Timothy W. Jenkins

Mailing Address 7515 Honesty Way

City

Bethesda

State

MD

Zip Code

20817

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
O'Connor & HannonOccupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 3 / 2 0 0 7

Transaction ID: C311

Amount of Each Receipt this Period

1500.00

SUBTOTAL of Receipts This Page (optional) .....

4400.00

TOTAL This Period (last page this line number only) .....

10400.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 31

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Jazz PAC

**A.**

Full Name (Last, First, Middle Initial)

SUN PAC

Mailing Address 1735 Market Street

City

Philadelphia

State

PA

Zip Code

19103

FEC ID number of contributing  
federal political committee.

**C** C00025346

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 1 / 2 0 0 7

Transaction ID: C310

Amount of Each Receipt this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)

Smithkline Beecham Corporation PAC

Mailing Address Five Moore Drive  
Research Triangle Park

City

Research Triangle

State

NC

Zip Code

27709

FEC ID number of contributing  
federal political committee.

**C** C00199703

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 6 / 2 0 0 7

Transaction ID: C327

Amount of Each Receipt this Period

5000.00

**C.**

Full Name (Last, First, Middle Initial)

Int'l Brotherhood of Electrical Workers COPE

Mailing Address 1125 15th Street, NW

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

**C** C00027342

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 3 0 / 2 0 0 7

Transaction ID: C208

Amount of Each Receipt this Period

2500.00

**SUBTOTAL** of Receipts This Page (optional) .....

12500.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 31

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Jazz PAC

**A.**

Full Name (Last, First, Middle Initial)

Int'l Brotherhood of Electrical Workers COPE

Mailing Address 1125 15th Street, NW

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

**C** C00027342

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 0 4 / 2 0 0 7

Transaction ID: C309

Amount of Each Receipt this Period

2500.00

**B.**

Full Name (Last, First, Middle Initial)

Walt Disney Productions Employees' PAC

Mailing Address 1150 17th Street, NW, Suite 400

City

Washington

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.

**C** C00197749

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 9 / 2 0 0 7

Transaction ID: C318

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Mortgage Bankers Association Political Action Committee

Mailing Address 1919 Pennsylvania Avenue NW  
8th Floor

City

Washington

State

DC

Zip Code

20006

FEC ID number of contributing  
federal political committee.

**C** C00004812

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 5 / 2 0 0 7

Transaction ID: C213

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

4500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 31

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Jazz PAC

**A.**

Full Name (Last, First, Middle Initial)

Laborers' Political League

Mailing Address 905 16th Street, NW

City

Washington

State

DC

Zip Code

20006

FEC ID number of contributing  
federal political committee.

**C** C00007922

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 4 / 2 0 0 7

Transaction ID: C209

Amount of Each Receipt this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)

National Association of Realtors Political Action Committee

Mailing Address 430 North Michigan Avenue

City

Chicago

State

IL

Zip Code

60611

FEC ID number of contributing  
federal political committee.

**C** C00030718

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 8 / 2 0 0 7

Transaction ID: C212

Amount of Each Receipt this Period

3000.00

**C.**

Full Name (Last, First, Middle Initial)

Abbott Laboratories Employee PAC

Mailing Address 100 Abbott Park Road

City

Abbott Park

State

IL

Zip Code

60064

FEC ID number of contributing  
federal political committee.

**C** C00040279

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 3 / 2 0 0 7

Transaction ID: C210

Amount of Each Receipt this Period

2000.00

**SUBTOTAL** of Receipts This Page (optional) .....

10000.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 31

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Jazz PAC

**A.**

Full Name (Last, First, Middle Initial)

National Air Traffic Controllers Association PAC

Mailing Address 1325 Massachusetts Avenue, NW

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.**C** C00238725

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	6		2	0	0	7

Transaction ID: C326

Amount of Each Receipt this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)

America Federation of State County &amp; Municipal Employees -- PEOPLE

Mailing Address 1625 L Street NW

City

Washington

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.**C** C00011114

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	8		2	0	0	7

Transaction ID: C214

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional) .....

10000.00

TOTAL This Period (last page this line number only) .....

37000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 31

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Jazz PAC

**A.**

Full Name (Last, First, Middle Initial)

Big Easy Committee

Mailing Address 607 14th Street, NW, Suite 800

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

**C** C00408062

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25709.60

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 7 / 2 0 0 7

Transaction ID: C322

Amount of Each Receipt this Period

148.52

Transfer-Joint Fundraising  
Proceeds

**B.**

Full Name (Last, First, Middle Initial)

Marathon Oil Company Employees' PAC

Mailing Address P.O. Box 75000

City

Detroit

State

MI

Zip Code

48275

FEC ID number of contributing  
federal political committee.

**C** C00040568

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 6 / 2 0 0 7

Transaction ID: C323

Amount of Each Receipt this Period

2500.00

[MEMO ITEM]

**C.**

Full Name (Last, First, Middle Initial)

Richard E. Zuschlag

Mailing Address 108 Astoria Loop

City

Lafayette

State

LA

Zip Code

70508

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Acadian Ambulance

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 0 5 / 2 0 0 7

Transaction ID: C324

Amount of Each Receipt this Period

750.00

[MEMO ITEM]

**SUBTOTAL** of Receipts This Page (optional) .....

148.52

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 31

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Jazz PAC

**A.**

Full Name (Last, First, Middle Initial)

Larry Sides

Mailing Address 1015 W. Saint Mary Blvd.

City

Lafayette

State

LA

Zip Code

70506

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Sides & Associates

Occupation

Advertising/Public Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 3 1 / 2 0 0 7

Transaction ID: C325

Amount of Each Receipt this Period

750.00

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

148.52

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 14 / 31

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Jazz PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Creative Impressions, LLC	<b>Transaction ID:</b> D458 <b>Date of Disbursement</b>
Mailing Address 3408 N. Pershing Drive	<div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 0 7 / 2 0 0 7</div> </div>
City State Zip Code Arlington VA 22201	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Catering	<div> <div></div> <div>1521.00</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Perkins Coie, LLP	<b>Transaction ID:</b> D175 <b>Date of Disbursement</b>
Mailing Address 1201 Third Avenue, 40th Floor	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 3 / 2 0 0 7</div> </div>
City State Zip Code Seattle WA 98101	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Legal & Accounting Services	<div> <div></div> <div>620.16</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Perkins Coie, LLP	<b>Transaction ID:</b> D181 <b>Date of Disbursement</b>
Mailing Address 1201 Third Avenue, 40th Floor	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 0 6 / 2 0 0 7</div> </div>
City State Zip Code Seattle WA 98101	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Legal & Accounting Services	<div> <div></div> <div>1999.85</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

**4141.01**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 15 / 31

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Jazz PAC

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Perkins Coie, LLP</p> <p>Mailing Address 1201 Third Avenue, 40th Floor</p> <p>City Seattle State WA Zip Code 98101</p> <p>Purpose of Disbursement Legal &amp; Accounting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D446</p> <p>Date of Disbursement 10 / 22 / 2007</p> <p>Amount of Each Disbursement this Period 2511.14</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Perkins Coie, LLP</p> <p>Mailing Address 1201 Third Avenue, 40th Floor</p> <p>City Seattle State WA Zip Code 98101</p> <p>Purpose of Disbursement Legal &amp; Accounting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D450</p> <p>Date of Disbursement 11 / 02 / 2007</p> <p>Amount of Each Disbursement this Period 1737.13</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Sugar Bowl</p> <p>Mailing Address Louisiana Superdome Sugar Bowl Drive</p> <p>City New Orleans State LA Zip Code 70112</p> <p>Purpose of Disbursement Tickets for Fundraising Event</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D478</p> <p>Date of Disbursement 12 / 19 / 2007</p> <p>Amount of Each Disbursement this Period 500.00</p>

**SUBTOTAL** of Disbursements This Page (optional) .....

4748.27

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 16 / 31

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Jazz PAC

A.

Full Name (Last, First, Middle Initial)

Campaign Finance Consultants

Mailing Address 10 G Street, NE, Suite 470

City  
Washington

State  
DC

Zip Code  
20002

Purpose of Disbursement  
Fundraising Consulting Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D449

Date of Disbursement

10 / 22 / 2007

Amount of Each Disbursement this Period

3000.00

SUBTOTAL of Disbursements This Page (optional) .....

3000.00

TOTAL This Period (last page this line number only) .....

11889.28



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 17 / 31

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Jazz PAC

A.

Full Name (Last, First, Middle Initial)

Big Easy Committee

Mailing Address 607 14th Street, NW, Suite 800

City  
Washington

State  
DC

Zip Code  
20005

Purpose of Disbursement  
Advance to Joint Fundraising Committee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D176

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional) .....

500.00

TOTAL This Period (last page this line number only) .....

500.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 18 / 31

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
Jazz PAC

A.

Full Name (Last, First, Middle Initial)  
Tim Johnson For South Dakota

Mailing Address P.O. Box 1859

City State Zip Code  
Sioux Falls SD 57101

Purpose of Disbursement  
Contribution

Candidate Name  
Tim Johnson

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: SD District:

Transaction ID: D177

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

B.

Full Name (Last, First, Middle Initial)  
Tim Johnson For South Dakota

Mailing Address P.O. Box 1859

City State Zip Code  
Sioux Falls SD 57101

Purpose of Disbursement  
Contribution

Candidate Name  
Tim Johnson

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: SD District:

Transaction ID: D477

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

C.

Full Name (Last, First, Middle Initial)  
Powers for Congress

Mailing Address P.O. Box 46

City State Zip Code  
Williamsville NY 14231

Purpose of Disbursement  
Contribution

Candidate Name  
Jonathan Powers

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 26

Transaction ID: D473

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 19 / 31

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
Jazz PAC

**A.**

Full Name (Last, First, Middle Initial)  
Friends Of Mark Warner

Mailing Address 201 North Union, Suite 350

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Contribution

Candidate Name  
Mark Warner

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: VA District:

**Transaction ID: D188**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)  
Lautenberg For Senate

Mailing Address Gateway One  
23rd Floor

City Newark State NJ Zip Code 07102

Purpose of Disbursement  
Contribution

Candidate Name  
Frank R Lautenberg

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NJ District:

**Transaction ID: D185**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

**C.**

Full Name (Last, First, Middle Initial)  
Jeff Merkley for Oregon

Mailing Address 921 SW Washington, Suite 470

City Portland State OR Zip Code 97205

Purpose of Disbursement  
Contribution

Candidate Name  
Jeffrey Merkley

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: OR District:

**Transaction ID: D189**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

12500.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 20 / 31

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Jazz PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Citizens For Harkin Mailing Address P.O. Box 811	<b>Transaction ID: D184</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 7
City Des Moines State IA Zip Code 50304 Purpose of Disbursement Contribution Candidate Name Tom Harkin Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IA District:	Amount of Each Disbursement this Period 5000.00 Category/Type
<b>B.</b> Full Name (Last, First, Middle Initial) Louisiana Democratic Party Mailing Address 701 Government Street City Baton Rouge State LA Zip Code 70802 Purpose of Disbursement 2007 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID: D174</b> Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 3 / 2 0 0 7 Amount of Each Disbursement this Period 5000.00 Category/Type 011
<b>C.</b> Full Name (Last, First, Middle Initial) Mark Pryor for U.S. Senate Mailing Address P.O. Box 2720 City Little Rock State AR Zip Code 72203 Purpose of Disbursement Contribution Candidate Name Mark Lunsford Pryor Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: AR District:	<b>Transaction ID: D476</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 1 / 2 0 0 7 Amount of Each Disbursement this Period 5000.00 Category/Type

SUBTOTAL of Disbursements This Page (optional) .....

15000.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 21 / 31

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
Jazz PAC

A.

Full Name (Last, First, Middle Initial)  
Reed Committee

Mailing Address P.O. Box 8628

City Cranston State RI Zip Code 02920

Purpose of Disbursement  
Contribution

Candidate Name  
Jack Reed

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: RI District:

Transaction ID: D179

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

B.

Full Name (Last, First, Middle Initial)  
Reed Committee

Mailing Address P.O. Box 8628

City Cranston State RI Zip Code 02920

Purpose of Disbursement  
Contribution

Candidate Name  
Jack Reed

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: RI District:

Transaction ID: D474

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

C.

Full Name (Last, First, Middle Initial)  
Reed Committee

Mailing Address P.O. Box 8628

City Cranston State RI Zip Code 02920

Purpose of Disbursement  
Contribution

Candidate Name  
Jack Reed

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: RI District:

Transaction ID: D475

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

7500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 22 / 31

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Jazz PAC

**A.**

Full Name (Last, First, Middle Initial)  
Friends of Senator Carl Levin

Mailing Address 10 G Street, NE, Suite 470

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Contribution

Candidate Name  
Carl Levin

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MI District:

**Transaction ID: D187**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)  
Udall For Colorado

Mailing Address 8690 Wolff Court, #200

City Westminster State CO Zip Code 80031

Purpose of Disbursement  
Contribution

Candidate Name  
Mark E Udall

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CO District:

**Transaction ID: D178**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

7500.00

**TOTAL** This Period (last page this line number only) .....

46000.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 23 / 31

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
Jazz PAC

**A.** Full Name (Last, First, Middle Initial)  
House Democratic Campaign Committee

Mailing Address P.O. Box 4385

City State Zip Code  
Baton Rouge LA 70821

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D197**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

**B.** Full Name (Last, First, Middle Initial)  
House Democratic Campaign Committee

Mailing Address P.O. Box 4385

City State Zip Code  
Baton Rouge LA 70821

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D196**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

**C.** Full Name (Last, First, Middle Initial)  
Michael Matherne for State Representative

Mailing Address 109 St. Michael Street

City State Zip Code  
Thibodaux LA 70301

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D455**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
Jazz PAC

**A.**

Full Name (Last, First, Middle Initial)  
Committee to Elect Neil Abramson

Mailing Address 906 Arabella Street

City State Zip Code  
New Orleans LA 70115

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D454**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)  
David Heitmeier Campaign Fund

Mailing Address 32 Kings Canyon

City State Zip Code  
New Orleans LA 70131

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D456**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Elsie Burkhalter for City Council

Mailing Address 724 Stanley Street

City State Zip Code  
Slidell LA 70458

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D437**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)  
Jazz PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Landrieu For Louisiana	<b>Transaction ID:</b> D195 <b>Date of Disbursement</b>
Mailing Address 5301 Canal Boulevard	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 0 / 2 0 0 7</div> </div>
City State Zip Code New Orleans LA 70124	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Nonfederal Contribution Candidate Name	<div>5000.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<div>Category/ Type</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Foster Campbell for Governor Campaign	<b>Transaction ID:</b> D193 <b>Date of Disbursement</b>
Mailing Address 816 Main Street	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 0 / 2 0 0 7</div> </div>
City State Zip Code Baton Rouge LA 70802	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Nonfederal Contribution Candidate Name	<div>2500.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<div>Category/ Type</div>
<b>C.</b> Full Name (Last, First, Middle Initial) The Committee To Elect James D. Caldwell	<b>Transaction ID:</b> D471 <b>Date of Disbursement</b>
Mailing Address 1615 Poydras Street, Suite 1250	<div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 0 5 / 2 0 0 7</div> </div>
City State Zip Code New Orleans LA 70112	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Nonfederal Contribution Candidate Name	<div>5000.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<div>Category/ Type</div>

**SUBTOTAL** of Disbursements This Page (optional) .....

12500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Jazz PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Jackie Clarkson Campaign	<b>Transaction ID:</b> D439 <b>Date of Disbursement</b>
Mailing Address 612 Aurora Oaks Drive	<div> <div>10</div> <div>12</div> <div>2007</div> </div>
City New Orleans State LA Zip Code 70131	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Nonfederal Contribution Candidate Name	<div>500.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Campaign To Elect Cynthia Willard Lewis	<b>Transaction ID:</b> D441 <b>Date of Disbursement</b>
Mailing Address 10911 Willowbrae Drive	<div> <div>10</div> <div>12</div> <div>2007</div> </div>
City New Orleans State LA Zip Code 70127	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Nonfederal Contribution Candidate Name	<div>500.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Bryant Hammett For Senate	<b>Transaction ID:</b> D191 <b>Date of Disbursement</b>
Mailing Address 6885 Hwy 84 West	<div> <div>09</div> <div>20</div> <div>2007</div> </div>
City Ferriday State LA Zip Code 71334	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Nonfederal Contribution Candidate Name	<div>2500.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

**3500.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Jazz PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Eric Lafleur Campaign	<b>Transaction ID:</b> D192 <b>Date of Disbursement</b>
Mailing Address 211 South Coreil	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 0 / 2 0 0 7</div> </div>
City Ville Platte State LA Zip Code 70586	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Nonfederal Contribution Candidate Name	<div> <div>5000.00</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Diana Bajoie Campaign	<b>Transaction ID:</b> D186 <b>Date of Disbursement</b>
Mailing Address PO Box 15168	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 0 / 2 0 0 7</div> </div>
City New Orleans State LA Zip Code 70175	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Nonfederal Contribution Candidate Name	<div> <div>1000.00</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Diana Bajoie Campaign	<b>Transaction ID:</b> D183 <b>Date of Disbursement</b>
Mailing Address PO Box 15168	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 8 / 2 0 0 7</div> </div>
City New Orleans State LA Zip Code 70175	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Nonfederal Contribution Candidate Name	<div> <div>1500.00</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

**7500.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)  
Jazz PAC

**A.**

Full Name (Last, First, Middle Initial)  
Michael Jackson Re-Election Fund

Mailing Address 660 North Foster, Suite A-214

City State Zip Code  
Baton Rouge LA 70802

Purpose of Disbursement  
Nonfederal Contribution  
Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼  
 State: District:

**Transaction ID: D182**

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
 09 / 19 / 2007

Amount of Each Disbursement this Period

2000.00

**B.**

Full Name (Last, First, Middle Initial)  
Kenny Cox for Louisiana Representative

Mailing Address 300 High School Street

City State Zip Code  
Mansfield LA 71052-3112

Purpose of Disbursement  
Nonfederal Contribution  
Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼  
 State: District:

**Transaction ID: D470**

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
 11 / 16 / 2007

Amount of Each Disbursement this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)  
Walter Boasso for Governor Campaign

Mailing Address 9151 Interline Avenue, 2nd Floor

City State Zip Code  
Baton Rouge LA 70809

Purpose of Disbursement  
Nonfederal Contribution  
Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼  
 State: District:

**Transaction ID: D194**

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
 09 / 10 / 2007

Amount of Each Disbursement this Period

2500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5000.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 29 / 31

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Jazz PAC

A.

Full Name (Last, First, Middle Initial)

Robert Billiot for State Representative

Mailing Address 341 Ave C

City  
WestwegoState  
LAZip Code  
70094Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D457

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	9	/	2	0	0	7

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) .....

1000.00

TOTAL This Period (last page this line number only) .....

38000.00

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 30 / 31

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)  
Jazz PAC

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Perkins Coie, LLP

Nature of Debt (Purpose):  
Legal & Accounting

Mailing Address 1201 Third Avenue, 40th Floor

City State ZIP Code  
Seattle WA 98101

Outstanding Balance Beginning This Period

0.00

**Transaction ID: D487**

Amount Incurred This Period

2730.73

Payment This Period

0.00

Outstanding Balance at Close of This Period

2730.73

**1) SUBTOTALS** This Period This Page (optional).....

2730.73

**2) TOTALS** This Period (last page this line number only).....

2730.73

**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....

0.00

**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

2730.73

Image# 28930309326

Form/Schedule: **F3XN**

Transaction ID:

\*\*\*\*\*